

## Better Care Fund 2021-22 Template

### 6. Metrics

Selected Health and Wellbeing Board:

Sefton

#### 8.1 Avoidable admissions

	19-20 Actual	20-21 Actual	21-22 Plan	Overview Narrative	
Unplanned hospitalisation for chronic ambulatory care sensitive conditions (NHS Outcome Framework indicator 2.3i)	Available from NHS Digital (link below) at local authority level.  Please use as guideline only	2,875.0	3,417.0	After a drop in Apr-20 due to the pandemic levels have stabilised to a lower average than pre-pandemic levels. Forecast position based on M1-6 suggests year end levels of 3417 ACSC admissions. System work remains in place focusing on a number of areas linked to ACSC to support reduced levels of	Please set out the overall plan in the HWB area for reducing rates of unplanned hospitalisation for chronic ambulatory sensitive conditions, including any assessment of how the schemes and enabling activity for Health and Social Care Integration are expected to impact on the metric.
	<a href="#">&gt;&gt; link to NHS Digital webpage</a>				

#### 8.2 Length of Stay

		21-22 Q3 Plan	21-22 Q4 Plan	Comments	
Percentage of in patients, resident in the HWB, who have been an inpatient in an acute hospital for: i) 14 days or more ii) 21 days or more As a percentage of all inpatients  (SUS data - available on the Better Care Exchange)	Proportion of inpatients resident for 14 days or more	12.7%	12.3%	Steady reduction in 14+ LoS from and average of 12.9% towards the England average of 11% but with acknowledgement performance consistently above this and will take longer to reach England levels beyond Q3/Q4 2021/22. The reduction equates to approx. 25-45 patients per month having a reduced length of stay. Again Sefton is higher than both North West and National levels with demographic factors an influence with older patients accounting for longer lengths of stay. Both plans	Please set out the overall plan in the HWB area for reducing the percentage of hospital inpatients with a long length of stay (14 days or over and 21 days and over) including a rationale for the ambitions that sets out how these have been reached in partnership with local hospital trusts, and an assessment of how the schemes and enabling activity in the BCF are expected to impact on the metric. See the main planning requirements document for more information.
	Proportion of inpatients resident for 21 days or more	7.0%	6.8%		

#### 8.3 Discharge to normal place of residence

	21-22 Plan	Comments	
Percentage of people, resident in the HWB, who are discharged from acute hospital to their normal place of residence  (SUS data - available on the Better Care Exchange)	92.4%	Latest levels at 91.6% and average between Apr19-Aug21 91.7%. Plan to improve and move in line with England average of 92.4%. (approx. increase of 20-35 additional discharges to usual place of residence per month)Current forecast indicates Sefton will average 90.9% for 21/22 and has dropped each year since 19/20 (Current actuals	Please set out the overall plan in the HWB area for improving the percentage of people who return to their normal place of residence on discharge from acute hospital, including a rationale for how the ambition was reached and an assessment of how the schemes and enabling activity in the BCF are expected to impact on the metric. See the main planning requirements document for more information.

#### 8.4 Residential Admissions

		19-20 Plan	19-20 Actual	20-21 Actual	21-22 Plan	Comments
Long-term support needs of older people (age 65 and over) met by admission to residential and nursing care homes, per 100,000 population	Annual Rate	756	860	553	594	The Covid-19 pandemic had a significant impact on overall care home admissions over 20/21 and continues to do so in 21/22. Having seen unusually low admissions for 20/21 and a 'recovery' in some aspects of admissions since we do not consider it realistic to expect a continued fall in admissions between 20/21 and 21/22. As a result
	Numerator	490	560	362	398	
	Denominator	64,779	65,126	65,463	66,974	

Please set out the overall plan in the HWB area for reducing rates of admission to residential and nursing homes for people over the age of 65, including any assessment of how the schemes and enabling activity for Health and Social Care Integration are expected to impact on the metric.

Long-term support needs of older people (age 65 and over) met by admission to residential and nursing care homes, per 100,000 population (aged 65+) population projections are based on a calendar year using the 2018 based Sub-National Population Projections for Local Authorities in England:

<https://www.ons.gov.uk/releases/subnationalpopulationprojectionsforengland2018based>

### 8.5 Reablement

		19-20 Plan	19-20 Actual
Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement / rehabilitation services	Annual (%)	90.3%	80.3%
	Numerator	213	192
	Denominator	236	239

21-22 Plan	Comments
90.2%	Despite an increase in the denominator between 19/20 and 20/21 we saw an increase in the proportion of clients supported to remain at home. We would expect this improvement to continue and have set a 5% improvement target for this year.
230	
255	

Please set out the overall plan in the HWB area for increasing the proportion of older people who are still at home 91 days after discharge from hospital into reablement/rehabilitation, including any assessment of how the schemes and enabling activity for Health and Social Care Integration are expected to impact on the metric.

Please note that due to the splitting of Northamptonshire, information from previous years will not reflect the present geographies. As such, all pre-populated figures above for Northamptonshire have been combined.

For North Northamptonshire HWB and West Northamptonshire HWB, please comment on individual HWBs rather than Northamptonshire as a whole.